PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

		CLAIMS AS	(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		* O			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					- 			+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL	32	OR	TOTAL	
CLAIMS AS AMENDED - PAR					R T mn 2)	(Column 3)		SMALL E		OR	OTHER SMALL I	
М		(Column 1) CLAIMS			HEST	(Column 3)	1) I	F 1	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	-	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> -</u>		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		J	+140=		OR	+280=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDIT. FEE	·	10	ADDIT. FEE	
		CLAIMS			HEST	(Column 3)	ጎ ፣		ADDI	1		ADDI
8		REMAINING AFTER			MBER IOUSLY	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
E		AMENDMENT			FOR	EXTRA		1002	FEE			FEE
AMENDMENT	Total	*	Minus	**	····	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	IT CL AIN	-	4	X42=		OR	X84=	
L	FIRST PRESE	INTATION OF M	OLTIPLE DE	PENDEN	II CLAIN		J	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	umn 2)	(Column 3)_					
6		CLAIMS REMAINING			HEST MBER	DDECENT			ADDI-	1		ADDI-
k		AFTER AMENDMENT		PREV	OUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT C	Total	*	Minus	**		=		X\$ 9=	7	OR	X\$18=	T Grant Brien
	Independent	*	Minus	***		=-		X42=		1	V04	
	FIRST PRESE	MULTIPLE DEPENDEN		IT CLAIM			742-		OR	704-		
	If the seat of the seat	4 la la M			#O" !-	-l 2		+140=		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
The "Highest Number Previously Paid For" IN 1415 SPACE is less than 3, enter 3. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

NOTICE OF FEE DUE

DATE:	
TO: DOWN	
FROM: Office of Initial Patent Examin	nation
SUBJECT: Fee Due	
APPLICATION NUMBER: 10/00	23, 988
A fee is due for the attached document substitution of the following reason. Please che authorization to charge a deposit account. It charge the appropriate fee. If an authorization fee deficiency.	eck the application for the appropriate
☐ Insufficient fee by check	
☐ Insufficient funds in deposit account	
☐ Declined credit card	
	eccount
☐ No fee submitted per requirement *	
The correct fee code: DO	amount $$43$
The suspended fee code: 1979	amount - \$ 35
Fee Due	amount = $\$$ 4.00
If you have any questions, please contact Cynt Eleanor Kurtz at 703-308-3642.	thia Streater at 703-306-5430 or
Torminal Ones	-,'